

Lobbyist's Client Annual Report - Amended

FORM C

For office use only. Do not write in this space If you have any questions please call (601) 359-9412 Lobbying Form Library "R" - Registration Centene Corporation on "E" - Mid Session behalf of its affiliates and "E" - End-of-Session Logged in by / Date subsidiaries 'A" - Lobbyist Annual Report 02-04-2022 'C" - Client Annual Report Follow directions for extensions 2021 **Lobbying Year Lobbying Beginning** Begin: 01-01-2021 (No Earlier - Jan. 1) (1) Lobbyists who register on or before February 25th must file a Mid-Session "E" and End-of-Session "E". (2) Lobbyists who register from February, 26th, through sine die must file an End-of-Session "E". Lobbying Ending End: (3) All Lobbyists must file an "A", Lobbyist's Annual Report, and all clients must file a "C". (No Later - Dec. 31st) 12-31-2021 File Number # LC20220839Ad SECTION A. Identification 1. Lobbyist's Client (Full Name) Centene Corporation on behalf of its affiliates and subsidiaries 2. Physical Address (required) City (or County) State Zip WASHINGTON 20036-4128 1150 CONNECTICUT AVE NW STE 1000 DC 3. Mailing Address City (or County) State Zip 1150 CONNECTICUT AVE NW STE 1000 WASHINGTON 20036-4128 DC 4. Permanent Phone # E-mail Fax emcpherson1@multistate.us 6. Type of Report 5. Cycle Year 2021 Form C - Amended Section B: Administrative Operation Costs 7. List below the names of all LOBBYISTS registered by you during this 8. Total compensation for all Lobbyists calendar year and total compensation for each lobbyist. <u>if activity</u> \$533,992.00 as identified in Item 7-B. terminated before December 31, indicate the termination date. Compensation Lobbyist Name Certificate No. Early Term. Date 9. Reimbursement(s) to Lobbyists \$12,755.85 L20201095 Dec 31, 2021 \$133,498.00 Henry Barbour L20201067 Dec 31, 2021 \$400,494.00 Clare L Hester 10. Overhead 7-B Total: \$533,992.00 \$0.00 11. Direct Payments \$0.00 12. Lobbying Expenses \$0.00 13. Urging Others to communicate \$0.00 (advertising, direct mail, etc.) 14. TOTAL (8-13) \$546,747.85

SECTION C: Payments to Public Officials / Employees							
Disclose amount of compensation for each category.							
15. Food or Beverages, Travel, Lodging, and Entertainment. This does NOT include	16. Gifts, loans, honorariums, Any other thing of value	19. TOTAL, SECTION C					
Receptions -See Section D for Receptions. \$0.00	\$0.00	\$0.00					

\$0.00			\$0.00					
SECTION D: Itemized Expenditure and Receptions								
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost		
	TOTAL, this page: \$0.00							
29. Itemize informa	tion for all receptions as defined in §	5-8-11 (7) (a), Mi	ss. Code Ann. (1972).					
Date	Place/Locat	ion	Est. No. Public Officials	Est. Total Attendanc	Est. Total Attendance Total Rece			
	Total, Reception Costs \$0.00							

Lobbyist's Client Signature

I certify that the above information is true and correct, according to my knowledge, information and belief.

Print name here Trudie Wright

Signature Trudie Wright Date Feb 04, 2022

PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).



Lobbyist's Client Annual Report

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For office use only. Do not write in this space If you have any questions please call (601) 359-9412 Lobbying Form Library "R" - Registration Centene Corporation on "E" - Mid Session behalf of its affiliates and "E" - End-of-Session Logged in by / Date subsidiaries 'A" - Lobbyist Annual Report 01-31-2022 'C" - Client Annual Report Follow directions for extensions 2021 **Lobbying Year Lobbying Beginning** Begin: (No Earlier - Jan. 1) 01-01-2021 (1) Lobbyists who register on or before February 25th must file a Mid-Session "E" and End-of-Session "E". (2) Lobbyists who register from February, 26th, through sine die must file an End-of-Session "E". Lobbying Ending End: (3) All Lobbyists must file an "A", Lobbyist's Annual Report, and all clients must file a "C". (No Later - Dec. 31st) 12-31-2021 File Number# LC20220754 SECTION A. Identification 1. Lobbyist's Client (Full Name) Centene Corporation on behalf of its affiliates and subsidiaries 2. Physical Address (required) City (or County) State Zip WASHINGTON 20036-4128 1150 CONNECTICUT AVE NW STE 1000 DC 3. Mailing Address City (or County) State Zip 1150 CONNECTICUT AVE NW STE 1000 WASHINGTON 20036-4128 DC 4. Permanent Phone # E-mail Fax emcpherson1@multistate.us 6. Type of Report 5. Cycle Year 2021 Form C Section B: Administrative Operation Costs 7. List below the names of all LOBBYISTS registered by you during this 8. Total compensation for all Lobbyists calendar year and total compensation for each lobbyist. <u>if activity</u> \$380,000.00 as identified in Item 7-B. terminated before December 31, indicate the termination date. Compensation Lobbyist Name Certificate No. Early Term. Date 9. Reimbursement(s) to Lobbyists \$12,755.85 L20201095 Dec 31, 2021 \$95,000.00 Henry Barbour L20201067 Dec 31, 2021 \$285,000.00 Clare L Hester 10. Overhead 7-B Total: \$380,000.00 \$0.00 11. Direct Payments \$0.00 12. Lobbying Expenses \$0.00 13. Urging Others to communicate \$0.00 (advertising, direct mail, etc.) 14. TOTAL (8-13) \$392,755.85

SECTION C: Payments to Public Officials / Employees								
Disclose amount of compensation for each category.								
15. Food or Beverages, Travel, Lodging, and Entertainment. This does NOT include	16. Gifts, loans, honorariums, Any other thing of value	19. TOTAL, SECTION C						
Receptions - See Section D for Receptions. \$0.00	\$0.00	\$0.00						

\$0.00			\$0.00					
SECTION D: Itemized Expenditure and Receptions								
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost		
				Т	OTAL, this page: \$0.0	00		
29. Itemize informa	tion for all receptions as defined in §	5-8-11 (7) (a), Miss	. Code Ann. (1972).					
Date	Place/Locat	ion	Est. No. Public Officials	Est. Total Attendar	nce Total R	Leception Cost		
	Total, Reception Costs \$0.00							

Lobbyist's Client Signature

I certify that the above information is true and correct, according to my knowledge, information and belief.

Print name here Trudie Wright

Signature Trudie Wright Date Jan 31, 2022

<u>PENALTY NOTIFICATION:</u> Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).



Lobbyist's Client Annual Report

FORM C

For office use only. Do not write in this space If you have any questions please call (601) 359-9412 Lobbying Form Library "R" - Registration Centene Corporation on "E" - Mid Session behalf of its affiliates and "E" - End-of-Session Logged in by / Date subsidiaries 'A" - Lobbyist Annual Report 01-25-2021 'C" - Client Annual Report Follow directions for extensions 2020 **Lobbying Year Lobbying Beginning** Begin: (No Earlier - Jan. 1) 01-01-2020 (1) Lobbyists who register on or before February 25th must file a Mid-Session "E" and End-of-Session "E". (2) Lobbyists who register from February, 26th, through sine die must file an End-of-Session "E". Lobbying Ending End: (3) All Lobbyists must file an "A", Lobbyist's Annual Report, and all clients must file a "C". (No Later - Dec. 31st) 12-31-2020 File Number# LC20210332 SECTION A. Identification 1. Lobbyist's Client (Full Name) Centene Corporation on behalf of its affiliates and subsidiaries 2. Physical Address (required) City (or County) State Zip WASHINGTON 20036-4128 1150 CONNECTICUT AVE NW STE 1000 DC 3. Mailing Address City (or County) State Zip 1150 CONNECTICUT AVE NW STE 1000 WASHINGTON 20036-4128 DC 4. Permanent Phone # E-mail Fax emcpherson1@multistate.us 6. Type of Report 5. Cycle Year 2020 Form C Section B: Administrative Operation Costs 7. List below the names of all LOBBYISTS registered by you during this 8. Total compensation for all Lobbyists calendar year and total compensation for each lobbyist. <u>if activity</u> \$380,000.00 as identified in Item 7-B. terminated before December 31, indicate the termination date. Compensation Lobbyist Name Certificate No. Early Term. Date 9. Reimbursement(s) to Lobbyists \$0.00 L20190945 Dec 31, 2020 \$95,000.00 Henry Barbour L20191016 Dec 31, 2020 \$285,000.00 Clare L Hester 10. Overhead 7-B Total: \$380,000.00 \$0.00 11. Direct Payments \$0.00 12. Lobbying Expenses \$0.00 13. Urging Others to communicate \$0.00 (advertising, direct mail, etc.) 14. TOTAL (8-13) \$380,000.00

SECTION C: Payments to Public Officials / Employees							
Disclose amount of compensation for each category.							
15. Food or Beverages, Travel, Lodging, and Entertainment. This does NOT include	16. Gifts, loans, honorariums, Any other thing of value	19. TOTAL, SECTION C					
Receptions -See Section D for Receptions. \$0.00	\$0.00	\$0.00					

Ψ0.00			\$0.00					
SECTION D: Itemized Expenditure and Receptions								
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost		
		TOTAL, this page: \$0.00						
29. Itemize informa	ntion for all receptions as defined in §	5-8-11 (7) (a), Mis	s. Code Ann. (1972).					
Date	Place/Locat	ion	Est. No. Public Officials	Est. Total Attendance	e Total Re	ception Cost		
	Total, Reception Costs \$0.00							

Lobbyist's Client Signature

I certify that the above information is true and correct, according to my knowledge, information and belief.

Print name here Trudie Wright

Signature Trudie Wright Date Jan 25, 2021

PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).



Lobbyist's Client Annual Report

FORM C

For office use only. Do not write in this space If you have any questions please call (601) 359-9412 Lobbying Form Library "R" - Registration "E" - Mid Session Magnolia Health Plan "E" - End-of-Session Logged in by / Date 01-30-2020 "A" - Lobbyist Annual Report "C" - Client Annual Report 2019 **Lobbying Year** Follow directions for extensions **Lobbying Beginning** Begin: 01-01-2019 (No Earlier - Jan. 1) (1) Lobbyists who register on or before February 25th must file a Mid-Session "E" and End-of-Session "E". **Lobbying Ending** End: (2) Lobbyists who register from February, 26th, through sine die must file an End-of-Session "E". (No Later - Dec. 31st) 12-31-2019 (3) All Lobbyists must file an "A", Lobbyist's Annual Report, and all clients must file a "C". LC20200687 File Number# SECTION A. Identification 1. Lobbyist's Client (Full Name) Magnolia Health Plan 2. Physical Address (required) City (or County) State Zip 1150 CONNECTICUT AVE NW STE 1000 WASHINGTON 20036-4128 DC 3. Mailing Address City (or County) State Zip 1150 CONNECTICUT AVE NW STE 1000 WASHINGTON 20036-4128 DC 4. Permanent Phone # E-mail Fax JDinesman@centene.com 5. Cycle Year 6. Type of Report 2019 Form C Section B: Administrative Operation Costs 7. List below the names of all LOBBYISTS registered by you during this 8. Total compensation for all Lobbyists calendar year and total compensation for each lobbyist. if activity \$380,000.00 as identified in Item 7-B. terminated before December 31, indicate the termination date. **Lobbyist Name** Certificate No. Early Term. Date Compensation 9. Reimbursement(s) to Lobbyists \$0.00 \$95,000.00 Henry Barbour L20180674 Dec 31, 2019 \$285,000.00 Clare L Hester L20180609 Dec 31, 2019 10. Overhead 7-B Total: \$380,000.00 \$0.00 11. Direct Payments \$0.00 12. Lobbying Expenses \$0.00 13. Urging Others to communicate \$0.00 (advertising, direct mail, etc.) 14. TOTAL (8-13) \$380,000.00

SECTION C: Payments	to Public Officials /	Employees							
Disclose amount of compensation	n for each category.								
15. Food or Beverages, Travel, L Entertainment. <u>This does NOT in</u>	<u>nclude</u>		16. Gifts, loans, honorariums, Any other thing of value		19. TOTAL, SECTION C				
Receptions -See Section D for Re \$0.00	eceptions.		\$0.00		\$0.00				
SECTION D: Itemized I	Expenditure and Rec	eptions							
Recipient Rec	cipient's Office Title	Date	Place	Provider	Description	Value/Cost			
				,	TOTAL, this page: \$0.00				
29. Itemize information for a	all receptions as defined in §5	5-8-11 (7) (a), Miss	. Code Ann. (1972).						
Date	Place/Locati	ion]	Est. No. Public Officials	Est. Total Attenda	nce Total Rec	ception Cost			
				Tota	al, Reception Costs \$0.00				
Lobbyist's Client Signat	ure								
I certify that the above informati									
according to my knowledge, info	rmation and belief.								
Print name here Jonathan D) inesman								
Signature Jonathan Dinesn	nan			Date Jan 30, 2020					
PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).									



FORM C

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If you have any questions ple	pasa call (601) 350-6353									
n you have any questions pre	asc can (001) 337-0333									
Lobbying Form Library										
"R" - Registration "E" - Mid Session							<u>Logged in</u>	n by / Date	Mag	nolia Health Plan 01-30-2019
	A'' - Lobbyist Annual Report C'' - Client Annual Report						<u>Lobbyi</u>	ng Year		2018
Follow directions for extensions						-		Beginning er - Jan. 1)		<u>Begin:</u> 01-01-2018
(1) Lobbyists who register of	n or hefore February 25th	must file a M	lid-Session "F" a	and End-of-	Session "F"			g Ending - Dec. 31st)		<i>End:</i> 12-31-2018
(2) Lobbyists who register <i>fi</i> (3) All Lobbyists must file ar	rom February, 26th, throug	gh sine die m	ust file an End-o	of-Session "		-	,	umber#		LC20190647
SECTION A. Ident	ification									
1. Lobbyist's Client (Full N Magnolia Health Pl	lame)									
2. Physical Address (required) 1150 CONNECTICUT AVE NW STE 1000				City (or County) State DC DC			Zip 200	Zip 20036-4128		
3. Mailing Address 1150 CONNECTIO	CUT AVE NW STE 100	00			City (or County) State Zip WASHINGTON DC 20)36-4128	
4. Permanent Phone #		F	ax		E-mail JDinesmar	n@cen	tene.com			
5. Cycle Year 2018					6. Type of Report Form C					
Section B: Administ	rative Operation Co	osts								
7. List below the names of a calendar year and total conterminated before December	pensation for each lobbyis	t. if activity	ng this				al compensation ntified in Item 7	n for all Lobbyists -B.		\$380,000.00
Lobbyist Name Henry Barbour	Certificate No.	Early 7 Dec 31, 2	Ferm. Date	Con	pensation \$190,000.00	9. Rei	mbursement(s)	to Lobbyists		\$0.00
Clare L Hester	L20170823	Dec 31, 2	2018	Total: \$	\$190,000.00 380,000.00	10. O	verhead			\$0.00
						11. Di	rect Payments			\$0.00
						12. La	obbying Expense	es		\$0.00
							ging Others to tising, direct ma			\$0.00
						14. 7	TOTAL (8-13)		\$380,000.00

SECTION C: Payment	ts to Public Officials /	Employees				
Disclose amount of compensati	ion for each category.					
15. Food or Beverages, Travel, Entertainment. This does NOT	<u>include</u>		16. Gifts, loans, honorariums, Any other thing of value		19. TOTAL, SECTION C	
Receptions - See Section D for I \$0.00	Receptions.		\$0.00		\$0.00	
SECTION D: Itemized	Expenditure and Reco	eptions				
Recipient Re	ecipient's Office Title	Date	Place	Provider	Description	Value/Cost
				r.	TOTAL, this page: \$0.00	
29. Itemize information for	r all receptions as defined in §5	5-8-11 (7) (a), Miss	. Code Ann. (1972).			
Date	Place/Locati	on .	Est. No. Public Officials	Est. Total Attenda	ince Total Rece	eption Cost
				Tota	al, Reception Costs \$0.00	
Lobbyist's Client Signa	ature					
I certify that the above informa						
according to my knowledge, inf	formation and belief.					
Print name here Jonathan	Dinesman					
Signature Jonathan Dines	man			Date Jan 30, 2019		
			rovides that a conviction for vio			
1 2	six (6) months in jail and a fi ne of Five Thousand Dollar		sand Dollars (\$1,000); and for s	subsequent offenses a	maximum of three (3) yea	rs
in the perimentially and a m	ne of the mousand Dollar.	s (\$5,000).				



FORM C

						Ford	office use only. Do	o not writ	e in this space
K	!! ((01) 250 (252								
If you have any questions plo	ease call (601) 359-6353								
Lobbying Form Library									
"R" - Registration "E" - Mid Session					-	<u>Logged in</u>	by/Date	Mag	nolia Health Plan 01-17-2018
	" - End-of-Session A" - Lobbyist Annual Report C" - Client Annual Report								2017
Follow directions for exte	-		Beginning er - Jan. 1)		<u>Begin:</u> 01-01-2017				
(1) Lobbyists who register <i>o</i>	-		g Ending - Dec. 31st)		<u>End:</u> 12-31-2017				
		gh sine die must file an End-c Report, and <i>all clients</i> must fi		"E".		<u>File Ni</u>	umber#		LC20180122
SECTION A. Ident	ification								
1. Lobbyist's Client (Full N Magnolia Health Pl									
2. Physical Address (required) 1150 CONNECTICUT AVE NW STE 1000				City (or County)StateZipWASHINGTONDC20			1 *)36-4128	
3. Mailing Address 1150 CONNECTIO	CUT AVE NW STE 10	00		City (or County) WASHING)36-4128	
4. Permanent Phone #		Fax		E-mail JDinesmar	n@cen	centene.com			
5. Cycle Year 2017				6. Type of Report Form C					
Section B: Administ	trative Operation Co	osts							
7. List below the names of a calendar year and total conterminated before December	npensation for each lobbyis	st. <u>if activity</u>				al compensation	for all Lobbyists B.		\$240,000.00
Lobbyist Name	Certificate No.	Early Term. Date	Con	npensation	9. Rei	imbursement(s)	to Lobbyists		
Henry Barbour	L20160889	Dec 31, 2017		\$120,000.00	7.1401	inibul sellen(s)	to Lobbyists		\$0.00
Clare L Hester	L20160851	Dec 31, 2017		\$120,000.00	10. O	verhead			
		7-В	Total: \$	5240,000.00					\$0.00
					11. Di	irect Payments			\$0.00
					12. La	obbying Expense	s		\$0.00
						rging Others to tising, direct ma			\$0.00
					14. 7	ГОТАL (8-13)		\$240,000.00

SECTION C: Payments t	o Public Officials /	Employees							
Disclose amount of compensation	for each category.								
15. Food or Beverages, Travel, Loc Entertainment. This does NOT incl	<u>lude</u>		16. Gifts, loans, honorariums, Any other thing of value		19. TOTAL, SECTION C				
Receptions - See Section D for Rece \$0.00	eptions.		\$0.00		\$0.00				
SECTION D: Itemized Ex	xpenditure and Rece	eptions							
Recipient Recip	pient's Office Title	Date	Place	Provider	Description	Value/Cost			
				r.	TOTAL, this page: \$0.00				
29. Itemize information for all	receptions as defined in §5	5-8-11 (7) (a), Miss	. Code Ann. (1972).						
Date	Place/Location	on]	Est. No. Public Officials	Est. Total Attenda	ince Total Reco	eption Cost			
				Tota	al, Reception Costs \$0.00				
Lobbyist's Client Signatur	re								
I certify that the above information	· · · · · · · · · · · · · · · · · · ·								
according to my knowledge, inform	iation and belief.								
Print name here Jonathan Dir	iesman								
Signature Jonathan Dinesma	n			Date Jan 17, 2018					
. PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).									



FORM C

							For a	office use only. Do	o not write	e in this space
If you have any questions plo	ease call (601) 359-6353									
Lobbying Form Library										
"R" - Registration "E" - Mid Session "E" - End-of-Session							Logged in	n by / Date	Mag	nolia Health Plan 01-23-2017
'A'' - Lobbyist Annual Report 'C'' - Client Annual Report							<u>Lobbyi</u>	ng Year		2016
Follow directions for extensions								<u>Beginning</u> er - Jan. 1)		<u>Begin:</u> 01-01-2016
1) Lobbyists who register on or before February 25th must file a Mid-Session "E" and End-of-Session "E".								<u>g Ending</u> - Dec. 31st)		<u>End:</u> 12-31-2016
) Lobbyists who register <i>from February, 26th, through sine die</i> must file an End-of-Session "E".) All Lobbyists must file an "A", Lobbyist's Annual Report, and <i>all clients</i> must file a "C".							<u>File Ni</u>	umber#		LC20170287
SECTION A. Ident	ification									
1. Lobbyist's Client (Full N Magnolia Health Pl										
2. Physical Address (required) 1150 CONNECTICUT AVE NW STE 1000					WASHINGTON DC 20			Zip 200)36-4128	
3. Mailing Address 1150 CONNECTIO	CUT AVE NW STE 100	00			City (or County) WASHING					036-4128
4. Permanent Phone #		F	Fax			1@ce	ntene.com			
5. Cycle Year 2016					6. Type of Report Form C					
Section B: Administ	trative Operation Co	osts								
calendar year and total con	all LOBBYISTS registered impensation for each lobbyis ier 31, indicate the terminat	st. <u>if activity</u>	ng this				otal compensation entified in Item 7-	n for all Lobbyists -B.		\$240,000.00
Lobbyist Name	Certificate No.		Term. Date	Con	npensation	9. R	eimbursement(s)	to Lobbyists		\$0.00
Clare L Hester Henry Barbour	L20150818 L20150783	Dec 31, 2			\$120,000.00 \$120,000.00					\$0.00
Henry Darmun	L20130763	Dec 31, 2		Total: \$	\$120,000.00 6240,000.00	10.0	Overhead			\$0.00
						11.1	Direct Payments			\$0.00
						12.1	Lobbying Expense	:s		\$0.00
							Urging Others to ertising, direct ma			\$0.00
						14.	TOTAL (8-13)		\$240,000.00
										·

SECTION C: Pay	ments to Public Officials /	Employees				
Disclose amount of comp	ensation for each category.					
15. Food or Beverages, T Entertainment. This does	NOT include		16. Gifts, loans, honorariums, Any other thing of value		19. TOTAL, SECTION C	
Receptions - See Section \$0.00	D for Receptions.		\$0.00		\$0.00	
SECTION D: Item	nized Expenditure and Rec	eptions				
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost
				,	TOTAL, this page: \$0.00	
29. Itemize informat	ion for all receptions as defined in §	5-8-11 (7) (a), Miss	. Code Ann. (1972).			
Date	Place/Locat	ion 1	Est. No. Public Officials	Est. Total Attenda	nnce Total Rec	ception Cost
				Tota	al, Reception Costs \$0.00	
Lobbyist's Client S	Signature					
	nformation is true and correct, lge, information and belief.					
Print name here Jona	athan Dinesman					
Signature Jonathan	Dinesman			Date Jan 23, 2017		
penalty of a maximu	FICATION: Miss. Code Ann. § m of six (6) months in jail and a f nd a fine of Five Thousand Dollar	fine of One Thous				



 $\underline{\mathsf{FORM}}$ C

Lobbying Form Library								or office use o	space	o noi write in inis 2.	
"R" - Registration "E" - Mid Session "E" - End-of-Session "A" - Lobbyist Annual Repor "C" - Client Annual Report Follow directions for extension							Logged in by / Date			Magnolia Health Plan 01-26-2016	
							<u>Lobbying Year</u>			2015	
(1) Lobbyists who register <i>on</i>	ou h afoua Eahmann 25	ith must file a M	id Cossion	"E" and	l End of Sossion "E	,,	Lobbying Beginning (No Earlier - Jan. 1)			<u>Begin:</u> 01-01-2015	
(2) Lobbyists who register <i>fro</i> (3) All Lobbyists must file an '	m February, 26th, thr	ough sine die m	ust file an	End-of-S	Session "E".	•		ving Ending ter - Dec. 31	<u>End:</u> 12-31-2015		
							<u>File</u>	Number#		LC20160493	
SECTION A. Identific 1. Lobbyist's Client (Full Na Magnolia Health Plan											
2. Physical Address (required) 1150 CONNECTICUT AVE NW STE 1000					City (or County) WASHINGTON State DC 20				20036-4128		
3. Mailing Address 1150 CONNECTICUT AVE NW STE 1000			City (or County) WASHINGTON State DC			Zip	20036-4128				
4. Permanent Phone #		Fax			E-mail JDine	sman@ce	entene.com				
5. Cycle Year 2015					of Report orm C						
Section B: Administra 7. List below the names of all calendar year and total comp terminated before December	LOBBYISTS registe	red by you durin yist. <u>if activity</u>	ng this				Total compensation for all Lobbyists identified in Item 7-B.			\$240000.00	
Lobbyist Name	Certificate No	. Early	Term. D		Compensation	9. Reimb	oursement(s) to	Lobbyists		\$0.00	
Henry Barbour Clare L Hester	L20140873 L20141007		31, 201:		120000.00 120000.00	10. Over	head				_
					\$240000.00					\$0.00	
							ct Payments			\$0.00	
						12. Lobby	ying Expenses			\$0.00	
						(advertisi	ng Others to co			\$0.00	
						14. TO	TAL (8-13)			\$240,000.00	

SECTION C: P	ayments to Public Officials / En	mployees					
Disclose amount of c	ompensation for each category.						
15. Food or Beverage	es, Travel, Lodging, and		16. Gifts, loans, hono	,	19. TOTAL, SECTI	ONC	
Entertainment. This			Any other thing of val	ue	1). 101AL, SECT	OIVC	
	ion D for Receptions.				80		
\$0.00			\$0.00				
SECTION D: It	emized Expenditure and Recep	tions					
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost	
					•	TOTAL, this page: \$	
29. Itemize infor	mation for all receptions as defined in §5	-8-11 (7) (a), Mis	s. Code Ann. (1972).				
Date	Place/Location	n Est. No. Public Officials Est. Total Attendance Total Reception Cost					
					Total, Reception Co		
					Total, Reception Co	sts \$	
Lobbyist's Clien	t Signature						
	ove information is true and correct,						
according to my know	wledge, information and belief.						
Print name here .	Jonathan Dinesman						
Frint name nere ,	Johan Direstran						
G!		D / In 20	2016				
Signature		Date Jan 26	0, 2016				
. <u>PENALTY NO</u>	<u>OTIFICATION:</u> Miss. Code Ann. §5	5-8-21 (1972)լ	provides that a convidence	tion for violation of	the lobbying law, for the first of	offense, carries a	
penalty of a max	timum of six (6) months in jail and a fi	ne of One Thou	usand Dollars (\$1,000)); and for subseque	nt offenses a maximum of thre	ee (3) years	
in the penitentiar	y and a fine of Five Thousand Dollars	s (\$5,000).	•	•			
1	•	` / /					
l							



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DELBERT HOSEMANN Secretary of State

INSTRUCTIONS: 1. Complete all information.

2. Only Lobbyists file a Mid-Session "E", or

End-of-Session "E" Repor Mississippi Secretary of Sta Attn: LOBBYING Physical: 401 Mississippi Street Jackson, Mississippi 39201 Mailing: Post Office Box 130	te S	http://www.so Elections Lobbying Lobbying Fom "R" - Registrat "E" - Mid Sess "E" - End-of-S	n Library tion sion ession			Logge	ed in by / De	<u>ate</u>	Magnolia Health Plan 01-28-2015
Jackson, Mississippi 39205- (601) 359-6353 [phone] (601 (1) Lobbyists who register on) 359-1499 [fax]	"A" - Lobbyist "C" - Client Ar Follow directio	nnual Rep ons for ex	oort tensions	Lobbying Year				2014
(2) Lobbyists who register <i>fro</i> (3) All Lobbyists must file an Lobbyist's Client Annual Rep	m February, 26th, through "A", Lobbyist's Annual Re	n sine die must file an port, and <i>all clients</i> m	End-of-S nust file a	ession "E". "C",			ing Beginn Earlier - Jan		<u>Begin:</u> 01-01-2014
Clients must notify our office				,car.			<i>ying Endin</i> ater - Dec. 3	_	<u>End:</u> 12-31-2014
						File	e Number #		LC20150608
SECTION A. Identifi 1. Lobbyist's Client (Full Na Magnolia Health Plan									
2. Physical Address (require 1150 CONNECTIC	ed) JT AVE NW STE 100	0		County) ASHINGTON			State DC	Zip	20036-4128
3. Mailing Address 1150 CONNECTIC	JT AVE NW STE 100	0		County) ASHINGTON			State DC	Zip	20036-4128
4. Permanent Phone #	Fax	·		E-mail JDine	sman@	centene.com			
5. Cycle Year 2014				of Report					
Section B: Administra	tive Operation Cost	s							
7. List below the names of all calendar year and total comp terminated before December	LOBBYISTS registered lensation for each lobbyist.	by you during this if activity				l compensation ified in Item 7-1		sts	\$200000.00
Lobbyist Name Clare L Hester	Certificate No. L20140219	Early Term. I Dec 31, 201		Compensation 120000.00	9. Rein	ibursement(s) t	o Lobbyists		\$0
Henry Barbour	L20140232	Dec 31, 201 7-B		80000.00 \$200000.00	10. Ove	erhead			\$0
					11. Dir	ect Payments			\$0
					12. Lol	bying Expenses	•		\$0
						ging Others to c sing, direct mai			\$0
					14 T	OTAL (8-13)	(0. /		

SECTION C: Payments to Public Officials / Employees Disclose amount of compensation for each category. 16. Gifts, loans, honorariums, 15. Food or Beverages, Travel, Lodging, and 19. TOTAL, SECTION C Any other thing of value Entertainment. This does NOT include Receptions - See Section D for Receptions. \$0 \$0 \$0 SECTION D: Itemized Expenditure and Receptions Recipient Recipient's Office Title Date Place Provider Description Value/Cost TOTAL, this page: \$ 29. Itemize information for all receptions as defined in §5-8-11 (7) (a), Miss. Code Ann. (1972). Place/Location Est. No. Public Officials Est. Total Attendance Total Reception Cost Total, Reception Costs \$ Lobbyist's Client Signature I certify that the above information is true and correct, according to my knowledge, information and belief. Jonathan Dinesman Print name here Date Jan 28, 2015 Signature PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).



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INSTRUCTIONS:

1. Complete *all* information.

2. Only Lobbyists file a Mid- End-of-Session "E" Report Mississippi Steretary of Stat Attn: LOBBYING Physical: 401 Mississippi Street Jackson, Mississippi 39201 Mailing: Post Office Box 136 Jackson, Mississippi 39205- (601) 359-6353 [phone] (601 (1) Lobbyists who register on (2) Lobbyists who register fro (3) All Lobbyists must file an Lobbyist's Client Annual Repo Clients must notify our office	of 0136 0136 0359-1499 [fax] or before February 25 m February, 26th, thre "A", Lobbyist's Annua ort on or before Januar if there are changes of	ough sine die must file an l Report, and all clients n ry 30th for the preceding	n Library tion sion ession t Annual nnual Re ons for en "E" and End-of-S tust file a	Report port xtensions 1 End-of-Session " Session "E". a "C",	Е".	Lobbyi (No E Lobb (No La	d in by / Da bying Year ng Beginni arlier - Jan. ying Ending ter - Dec. 31	<u>ng</u> l)	Magnolia Health Plan 01-22-2014 2013 Begin: 01-01-2013 End: 12-31-2013 LC20140369	
2. Physical Address (required) 1150 CONNECTICUT AVE NW STE 1000				r County) ASHINGTON			0036-4128			
3. Mailing Address 1150 CONNECTICUT AVE NW STE 1000				r County) ASHINGTON			State DC	Zip 2	0036-4128	
4. Permanent Phone #		Fax		E-mail JDine	esman@o	centene.com				
5. Cycle Year 2013				of Report orm C						
Section B: Administra	tive Operation Co	osts								
7. List below the names of all calendar year and total comp terminated before December	ensation for each lobby	vist. <u>if activity</u>				l compensation fi ified in Item 7-E		ts	\$120000.00	
Lobbyist Name	Certificate No.		Date	Compensation	9. Reim	bursement(s) to	Lobbyists		ФО.	
Henry Barbour	L20120989	Dec 31, 201	3	60000.00					\$0	
Clare L Hester	L20121001	Dec 31, 201		60000.00 \$120000.00	10. Ove	erhead			\$0	
					11. Dir	ect Payments			\$0	
					12. Lob	bying Expenses			\$0	
						ing Others to co sing, direct mai			\$0	
					14. TO	OTAL (8-13)			\$120,000.00	

SECTION C: Payments to Public Officials / Employees Disclose amount of compensation for each category. 15. Food or Beverages, Travel, Lodging, and 16. Gifts, loans, honorariums, 19. TOTAL, SECTION C Any other thing of value Entertainment. This does NOT include Receptions - See Section D for Receptions. **\$0** \$0 \$0 SECTION D: Itemized Expenditure and Receptions Recipient's Office Title Recipient Date Place Provider Description Value/Cost TOTAL, this page: \$ 29. Itemize information for all receptions as defined in §5-8-11 (7) (a), Miss. Code Ann. (1972). Date Place/Location Est. No. Public Officials Est. Total Attendance Total Reception Cost Total, Reception Costs Lobbyist's Client Signature I certify that the above information is true and correct, according to my knowledge, information and belief. Print name here Jonathan Dinesman Signature Date PENALTY NOTIFICATION: Miss. Code Ann. §5-8-21 (1972) provides that a conviction for violation of the lobbying law, for the first offense, carries a penalty of a maximum of six (6) months in jail and a fine of One Thousand Dollars (\$1,000); and for subsequent offenses a maximum of three (3) years in the penitentiary and a fine of Five Thousand Dollars (\$5,000).



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INSTRUCTIONS: 1. Complete all information. 2. Only Lobbyists file a Mid-Session "E", or website http://www.sos.ms.gov Bid-of-Session "E" Report. Mississippi Secretary of State Attn: LOBBYING Physical: 401 Mississippi Street Jackson, Mississippi 39201 Mailing: Post Office Box 136 Jackson, Mississippi 39205-0136 Got Office Box 136 Jackson, Mississippi 39205-0136 Got Office Box 136 Jackson, Mississippi 39205-0136 Got Office Box 136 Jackson, Mississippi 39205-0136 Jackson, Miss						Lobbyi (No Ea	d in by / Da bying Year ng Beginnin arlier - Jan. 1 ving Ending eer - Dec. 31 ficate No. #	ig) st)	Magnolia Health Plan 01-17-2013 2012 Begin: 01-01-2012 End: 12-31-2012 LC20130218	
SECTION A. Identifica	ation									
Lobbyist's Client (Full Nam Magnolia Health Plan Physical Address (required			State DC	Zip	0036-4128					
1150 CONNECTICUT AVE NW STE 1000 3. Mailing Address 1150 CONNECTICUT AVE NW STE 1000			City (o	or County) (ASHINGTON	State Zip			0036-4128		
4. Permanent Phone #		Fax		E-mail	omon@aa	tono com				
5. Cycle Year		<u> </u>	6. Tyne	of Report	sman@cen	iterie.com				
2012				orm C						
Section B: Administrat	ive Operation C	Costs								
7. List below the names of all l calendar year and total compe terminated before December 3	nsation for each lobb	yist. <u>if activity</u>				mpensation f d in Item 7-B	or all Lobbyist	es -	\$120000.00	
Lobbyist Name	Certificate No		Date	Compensation	9. Reimbu	rsement(s) to	Lobbyists		\$0	
Clare L Hester	L20110916	Dec 31, 201		60000.00					φυ	
Henry Barbour	L20110853	Dec 31, 201		\$120000.00	10. Overhe	ead			\$0	
					11. Direct	Payments			\$0	
					12. Lobbyi	ng Expenses			\$0	
						Others to co g, direct mail			\$0	
					14. TOT	AL (8-13)			\$120,000.00	
SECTION C: Payment										
Disclose amount of compensate 15. Food or Beverages, Travel Entertainment. This does NOT	, Lodging, and	у.		. Gifts, loans, honor			19. T	OTAL	, SECTION C	
Parent Million of This work 1101			ļ,				'			

Receptions -See Sec \$0	tion D for Receptions.		\$0		\$0	
SECTION D: I	temized Expenditure and Rece	ptions				
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost
						TOTAL, this page: \$
29. Itemize info	rmation for all receptions as defined in §	5-8-11 (7) (a), Miss. (Code Ann. (1972).			
Date	Place/Location	Est. No. Publi	c Officials	Total	Reception Cost	
					Total, Reception	ı Costs \$
Lobbyist's Clie	nt Signature					
	ove information is true and correct, owledge, information and belief.					
Print name here	Jonathan Dinesman					
Signature		Date Jan 17, 2	2013			
penalty of a max	OTIFICATION: Miss. Code Ann. ximum of six (6) months in jail and a rry and a fine of Five Thousand Dolla	fine of One Thous				·



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INSTRUCTIONS: 1. Complete all information. 2. Only Lobbyists file a Mid-End-of-Session "E" Report Mississippi Secretary of Stat Attn: LOBBYING Physical: 401 Mississippi Street Jackson, Mississippi 39201 Mailing: Post Office Box 130 Jackson, Mississippi 39205-(601) 359-6353 [phone] (601) Lobbyists who register on (2) Lobbyists who register fro (3) All Lobbyists must file an Lobbyist's Client Annual Report Clients must notify our office	or before February 2 m February, 26th, the "A", Lobbyist's Annu ort on or before January	rough sine die must file an al Report, and all clients n ary 30th for the preceding l	a Library ion ion ession t Annual mual Re ons for et "E" and End-of-S tust file a obbying	I Report port stensions I End-of-Session "E Session "E".	;".	Logged in by / Da Lobbying Year Lobbying Beginni (No Earlier - Jan. Lobbying Ending (No Later - Dec. 31) Certificate No. 4	ng 1) g	Magnolia Health Plan 01-31-2012 2011 Begin: 01-01-2011 End: 12-31-2011	
								LC20120703	
SECTION A. Identifit 1. Lobbyist's Client (Full Na Magnolia Health Plan 2. Physical Address (require 1150 CONNECTICU	me) d)	1000	W.	r County) ASHINGTON		State DC		0036-4128	
3. Mailing Address 1150 CONNECTICU	JT AVE NW STE	1000		r County) ASHINGTON		State DC	Zip 2	20036-4128	
4. Permanent Phone #		Fax		E-mail JDines	sman@cer	ntene.com			
5. Cycle Year				of Report					
2011			Fo	orm C					
Section B: Administra 7. List below the names of al calendar year and total comp terminated before December	LOBBYISTS registe ensation for each lobb	ered by you during this byist. if activity				ompensation for all Lobbyis ed in Item 7-B.	ts	\$120000.00	
Lobbyist Name	Certificate No			Compensation	9. Reimbu	rrsement(s) to Lobbyists		\$0	
Clare L. Hester	L20100481	Dec 31, 201		60000.00					
Henry Barbour	L20100337	Dec 31, 201		\$120000.00	10. Overh	ead		\$0	
					11. Direct	Payments		\$0	
					12. Lobby	ing Expenses		\$0	
						g Others to communicate g, direct mail, etc.)		\$0	
					14. TOT	TAL (8-13)		\$120000	
SECTION C: Paymer									
Disclose amount of compens 15. Food or Beverages, Trave		у.	1.6	. Gifts, loans, honor	rariums				
Entertainment. <u>This does NO</u>				other thing of valu		19. 7	TOTAL	, SECTION C	

Receptions -See Sec \$0	ction D for Receptions.		\$0		\$0			
SECTION D: I	Itemized Expenditure and Rece	ptions						
Recipient	Recipient's Office Title	Date	Place	Provider	Description	Value/Cost		
						TOTAL, this page: \$		
29. Itemize info	ormation for all receptions as defined in §	5-8-11 (7) (a), Miss.	Code Ann. (1972).					
Date	Place/Location	Est. No. Public Officials Est. Total Attendance			Total	Total Reception Cost		
					Total, Reception	Costs \$		
Lobbyist's Clie	ent Signature							
	bove information is true and correct, owledge, information and belief.							
Print name here	Jonathan Dinesman							
Signature		Date Jan 31,	2012					
penalty of a ma	OTIFICATION: Miss. Code Ann. sximum of six (6) months in jail and a arry and a fine of Five Thousand Dollary	fine of One Thous						